

Parcel:
04-2S-17-04667-002 (43351)

Result: 1 of 1

Owner & Property Info

Owner	ELLIS SAM ELLIS MARGARET 346 NE CEMETERY LOOP LAKE CITY, FL 32055		
Site	346 NE CEMETERY Loop, LAKE CITY		
Description*	COMM NE COR OF NW1/4 OF NE1/4, RUN S 30 FT TO S R/W GREENE CEMETERY CR RD, RUN SW ALONG R/W 286.25 FT FOR POB, CONT SW 241.86 FT, S 719.07 FT, E 233.33 FT, N 778.42 FT TO POB & COMM AT THE NW COR OF NW1/4 OF NE1/4, THENCE RUN S ALONG THE E LINE 235.56 FT, TO S R/W OF GREENE CEMETERY RD, THENCE S 83 DEG E ALONG S RW 342.39 FT, N 74 DEG E STILL ALONG R/W 228.63 FT TO POB. THENCE CONT N 74 DEG E ALONG R/W 263.71 FT S 719.07 FT, W 254.41 FT, THEN N 654.35 FT TO POB. 640-361, 657-626, 683-63, 768-1794, 768-1806, 790-830, 857-790, 869-1633, 869-1634, LE 993-2336, DC 1371-159, WD 1428-2380, <<<less		
Area	12.03 AC	S/T/R	04-2S-17
Use Code**	NON AG ACREAGE (9900)	Tax District	3

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Dale Houston PHONE 386-623-6522

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Sam Ellis

IN Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Glen Whittington</u> Signature _____
	License #: <u>EC 13002957</u> Phone #: <u>386-972-1700</u> Qualifier Form Attached <input checked="" type="checkbox"/>
MECHANICAL/ A/C	Print Name <u>Steven Mollman</u> Signature _____
	License #: <u>CAC 1819696</u> Phone #: <u>352-339-6640</u> Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.



COLUMBIA COUNTY BUILDING DEPARTMENT
LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

I, Steven Mollman (license holder name), licensed qualifier
 for Mollman Air Conditioning & Refrigeration LLC (company name), do certify that
 the below referenced person(s) listed on this form is/are **employed** by me directly or through an
 employee leasing arrangement; or, is an officer of the corporation, or, partner as defined in
 Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and
 control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burd	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
 under my license and fully responsible for compliance with all Florida Statutes, Codes, and
 Local Ordinances. I understand that the State and County Licensing Boards have the power and
 authority to discipline a license holder for violations committed by him/her, his/her agents,
 officers, or employees and that I have full responsibility for compliance with all statutes, codes
 and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
 must notify this department in writing of the changes and submit a new letter of authorization
 form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
 use your name and/or license number to obtain permits.

CAC 1819696 3/30/22
 License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:
 STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is _____
 personally appeared before me and is known by me or has produced identification
 (type of I.D.) Drivers License on this 30th day of March, 2022

NOTARY'S SIGNATURE (Seal/Stamp)





COLUMBIA COUNTY BUILDING DEPARTMENT
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Glen Whittington (license holder name), licensed qualifier for Whittington Electric Inc (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Dan Burd</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

[Signature] License Qualifiers Signature (Notarized) FL13002957 License Number 3/7/16 Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington, personally appeared before me and is known by me or has produced identification (type of I.D.) FL DL on this 7 day of MARCH, 20 16.

[Signature]
 NOTARY'S SIGNATURE



Mobile Home Permit Worksheet

EL175

Application Number: _____

Date: _____

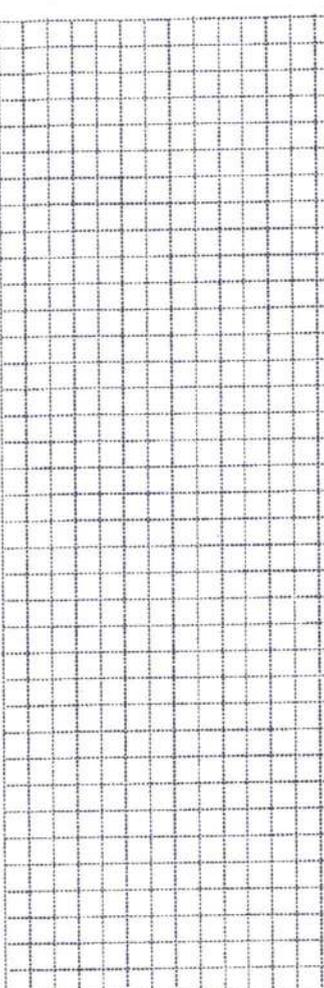
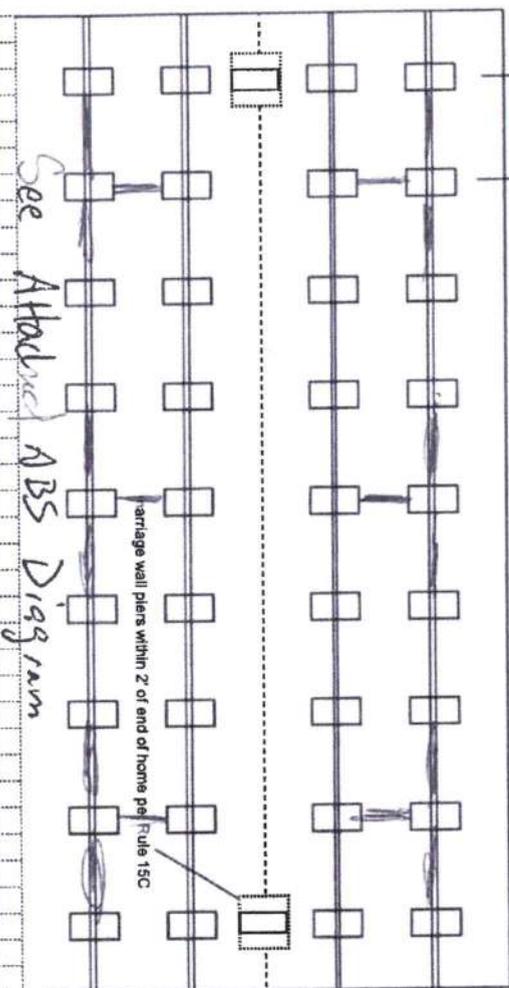
Installer: Dale Houston License # PH 1133172

Address of home being installed: 346 NE GEORGETOWN LOOP LAKE CITY, FL 32055

Manufacturer: Destiny Length x width: 28x54

NOTE: If home is a single wide fill out one half of the blocking plan. If home is a triple or quad wide sketch in remainder of home. I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials: DH



New Home Used Home

Home installed to the Manufacturer's Installation Manual

Home is installed in accordance with Rule 15-C

Single wide Wind Zone II Wind Zone III

Double wide Installation Decal # 85363

Triple/Quad Serial # DOSH 11545GAB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	16" x 16" (256)	18 1/2" x 18 (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4'6"	6'	7'	8'	8'	8'
2000 psf	6'	8'	8'	8'	8'	8'
2500 psf	7'6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15-C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size: 23 x 36

Perimeter pier pad size: 16 x 16

Other pier pad sizes (required by the mfg.): _____

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening: >4 Pier pad size: 23 x 36

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4ft 6ft Centerline

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
 Manufacturer: DLW 1101V

Sidewall Longitudinal Marriage wall Shearwall

Numbel: 574
574
674
674

Mobile Home Permit Worksheet

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil without testing.

X _____ X _____ X _____

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

DA Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

DAK HUSTON

Date Tested

N/A 8/23/22

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 7, 5

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 7, 11

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 7, 1

Application Number: _____

Date: _____

Site Preparation

Debris and organic material removed _____ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: lag Length: 6" Spacing: 24"
 Walls: Type Fastener: screw Length: 4.5" Spacing: 24"
 Roof: Type Fastener: lag Length: 6" Spacing: 24"
 For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials DA

Type gasket Pg. 4, 28

foam pad

Installed: Between Floors Yes
 Between Walls Yes
 Bottom of ridgebeam Yes

Weatherproofing:

The bottomboard will be repaired and/or taped. Pg. 4, 9
 Siding on units is installed to manufacturer's specifications.
 Fireplace chimney installed so as not to allow intrusion of rain water. Yes N/A

Miscellaneous

Skirting to be installed. Yes No
 Dryer vent installed outside of skirting. Yes N/A
 Range downflow vent installed outside of skirting. Yes
 Drain lines supported at 4 foot intervals. Yes N/A
 Electrical crossovers protected. Yes N/A
 Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Dak Huston

Date

5/24/22

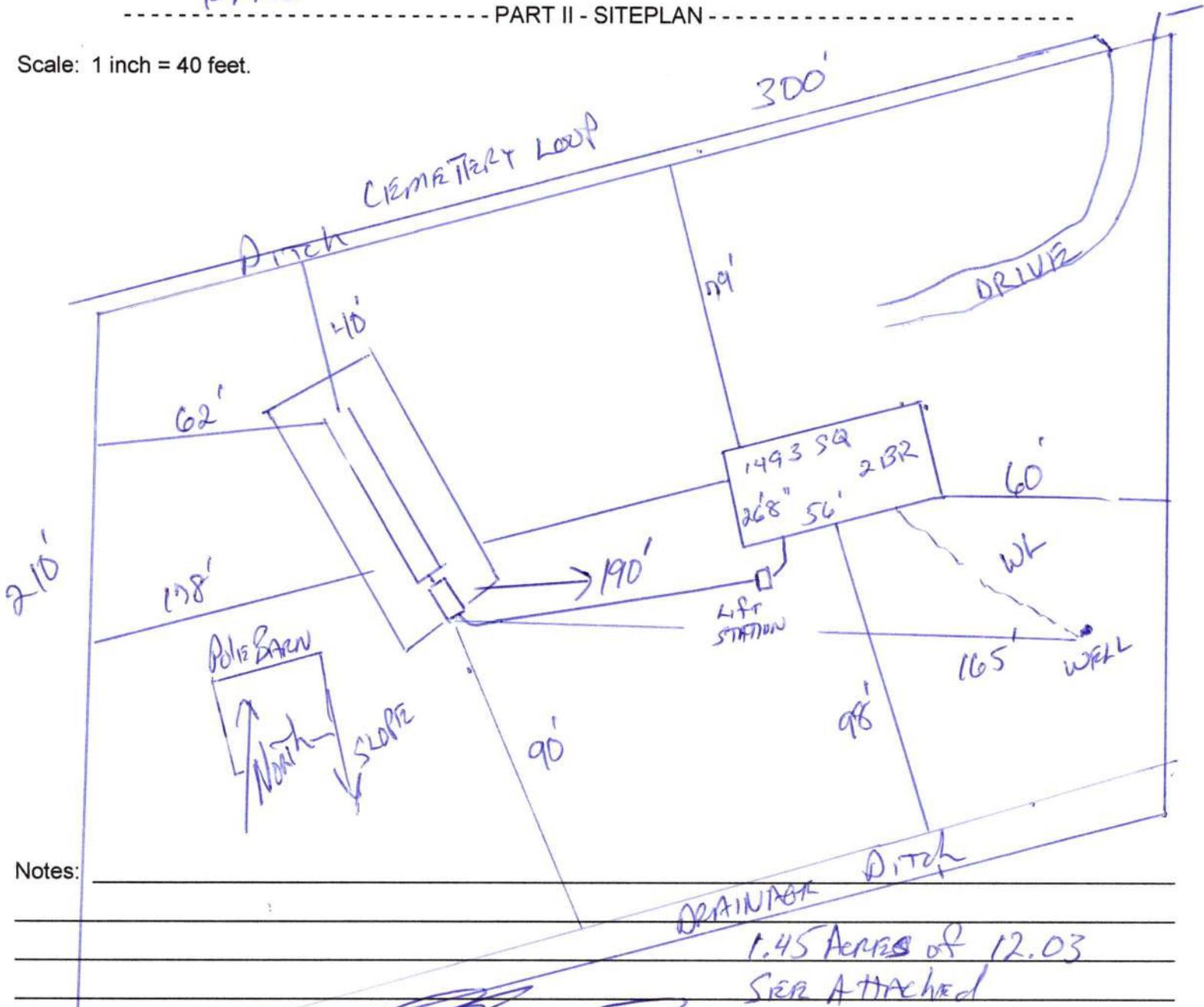
**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT**

Permit Application Number _____

ELLIS

----- PART II - SITEPLAN -----

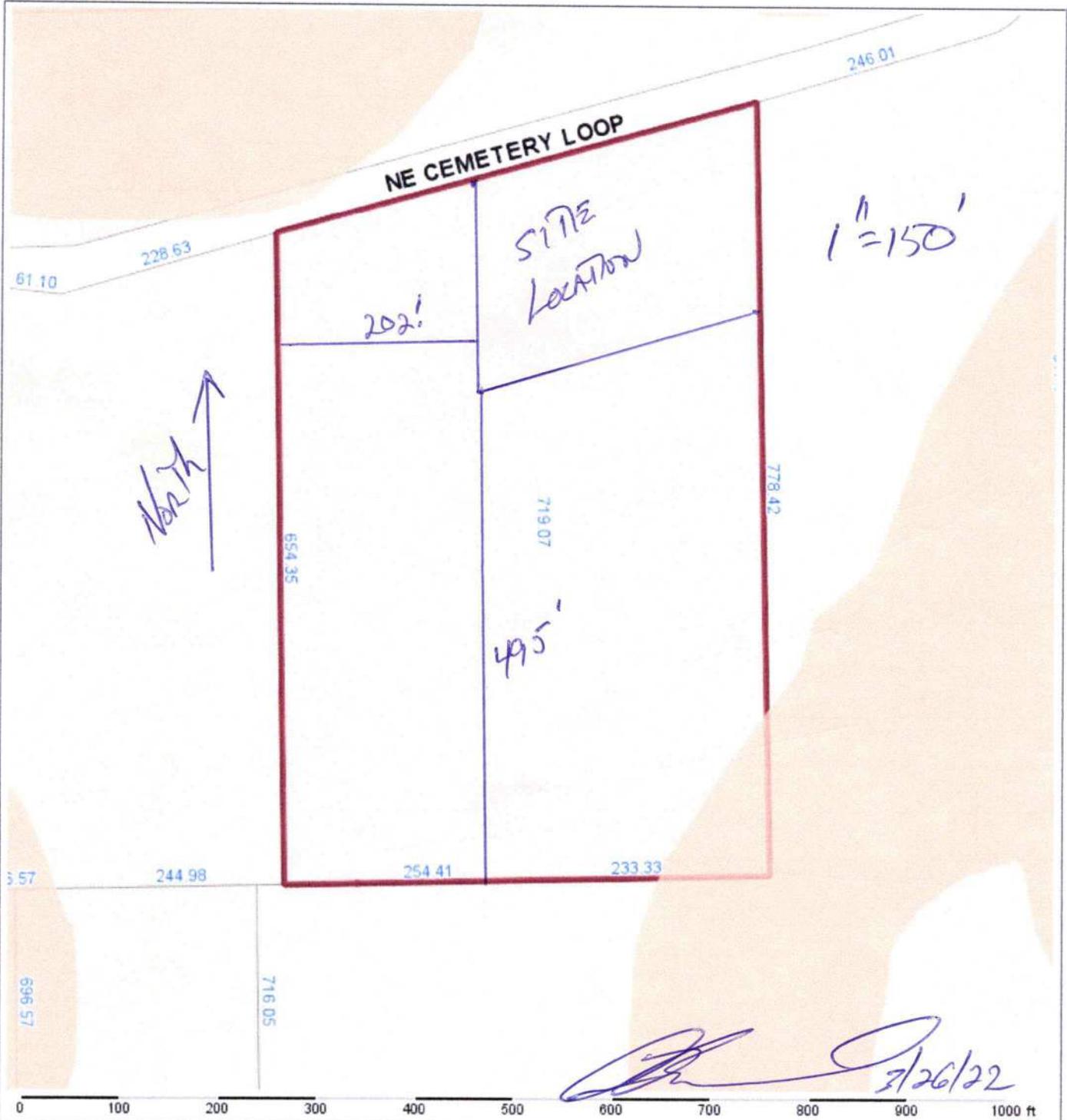
Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: _____ CONTRACTOR
 Plan Approved _____ Not Approved _____ Date _____
 By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 04-2S-17-04667-002 (43351) | NON AG ACREAGE (9900) | 12.03 AC
 COMM NE COR OF NW1/4 OF NE1/4, RUN S 30 FT TO S R/W GREENE CEMETERY CR RD, RUN SW ALONG R/W 286.25 FT FOR POB, CONT SW 241.86 FT, S 719.07 FT, E 233.3

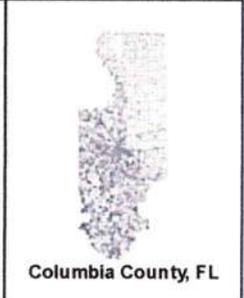
Owner: **ELLIS SAM**
ELLIS MARGARET
 346 NE CEMETERY LOOP
 LAKE CITY, FL 32065

Site: 346 NE CEMETERY Loop, LAKE CITY

Sales	1/22/2021	\$65,000	V (Q)
Info	3/14/2003	\$20,000	V (U)
	11/2/1992	\$6,385	V (U)

2022 Working Values			
Mkt Lnd	\$60,150	Appraised	\$63,400
Ag Lnd	\$0	Assessed	\$63,400
Bldg	\$0	Exempt	\$0
XFOB	\$3,250		
Just	\$63,400	Total	county:\$63,400
		Taxable	city:\$0
			other:\$0
			school:\$63,400

NOTES:

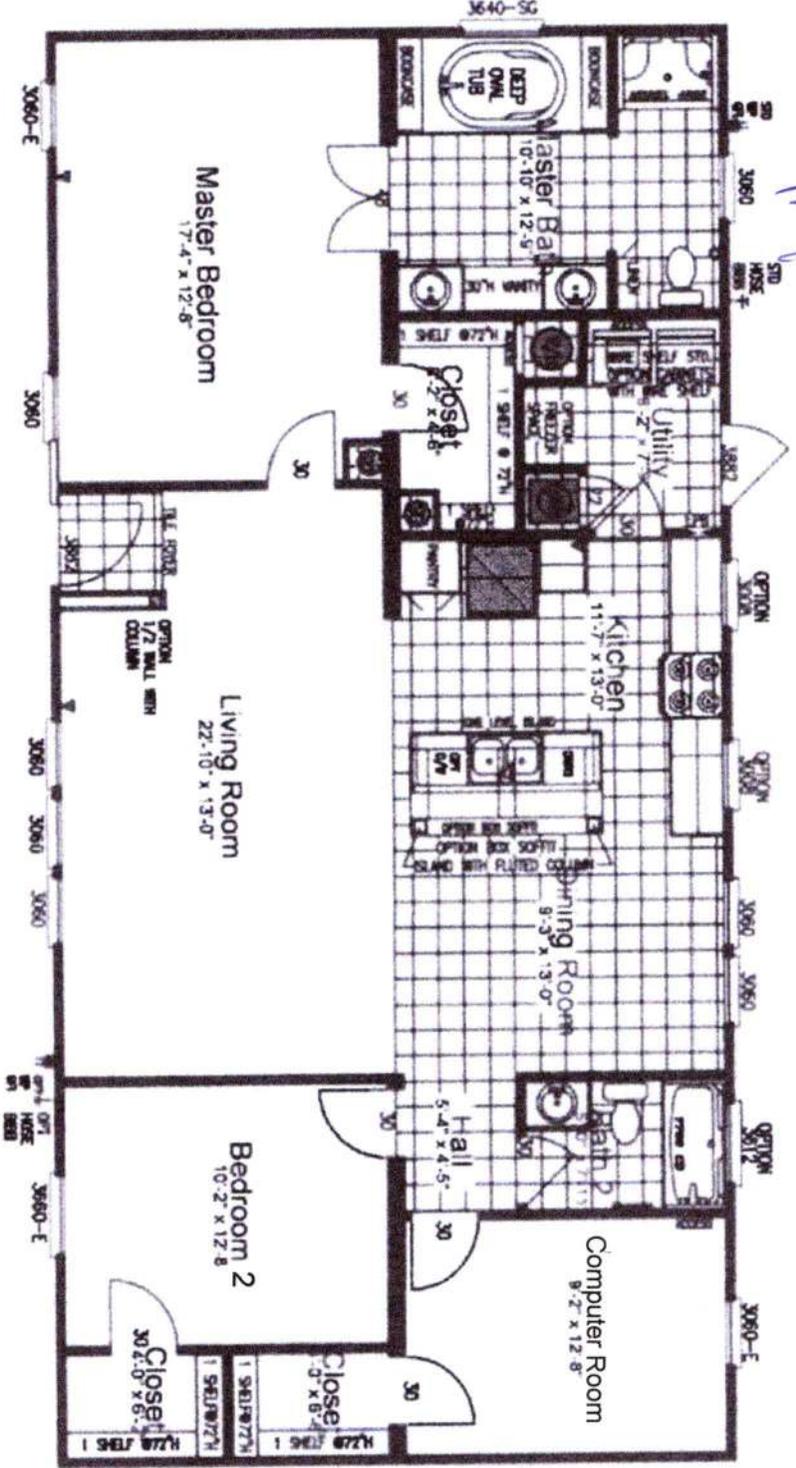


This information was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. GrizzlyLogic.com

2/18/11

Fills approx 1/2

56'



MODEL: 290TE28563F 2 BR. ~ 2 BA.
 28'-0" X 56'-0" ~ 1493 SQ. FT.

[Signature]
 3/26/22



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **6/22/2020 2:42:11 PM**
Address: **346 NE CEMETERY LOOP**
City: **LAKE CITY**
State: **FL**
Zip Code **32055**

Parcel ID **04-2S-17-04667-002**

REMARKS: **This address is a verified address in the county's addressing system.**
Verification ID: 704943bd-7de2-444f-82b9-f8ae958e4236

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **GIS Specialist**

Columbia County GIS/911 Addressing Coordinator